

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Cigna Corporation Political Action Committee

ADDRESS (number and street) ▼

601 Pennsylvania Avenue NW

South Building Suite 835

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00085316

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

05

01

2016

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

05

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kristin Julason Damato

Signature of Treasurer

Kristin Julason Damato

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

14

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 05 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y 05 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2016		242946.08
(b) Cash on Hand at Beginning of Reporting Period.....	226395.31	
(c) Total Receipts (from Line 19) .....	46689.14	228663.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	273084.45	471609.45
7. Total Disbursements (from Line 31) .....	35750.00	234275.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	237334.45	237334.45
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Cigna Corporation Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	32002.71	114688.17
(ii) Unitemized .....	14686.43	113975.20
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	46689.14	228663.37
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	46689.14	228663.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	46689.14	228663.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	46689.14	228663.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	1175.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1175.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	167000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	22250.00	66100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35750.00	234275.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35750.00	234275.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	46689.14	228663.37
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	46689.14	228663.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	1175.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	1175.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Anthony Abate**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-16989-20-23**

Amount of Each Receipt this Period

155.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Anthony Abate**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Supply Chain Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-16925-20-23**

Amount of Each Receipt this Period

155.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marc M Alcedo**

Mailing Address 1729 Canonero Dr

City

Austin

State

TX

Zip Code

78746-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-20545-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

335.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marc M Alcedo**

Mailing Address 1729 Canonero Dr

City State Zip Code  
Austin TX 78746-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Cigna Corp. Government Affairs Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-20470-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael B Alexander**

Mailing Address 128 E 15th St

City State Zip Code  
Ship Bottom NJ 08008-4467

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Cigna Corp. Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-10426-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael B Alexander**

Mailing Address 128 E 15th St

City State Zip Code  
Ship Bottom NJ 08008-4467

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Cigna Corp. Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-10390-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

78.86

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory J Allen**

Mailing Address 1000 Corporate Centre Dr

City

Franklin

State

TN

Zip Code

37067-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-29363-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregory J Allen**

Mailing Address 1000 Corporate Centre Dr

City

Franklin

State

TN

Zip Code

37067-2611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-29217-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Olumide I Anifowoshe**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-29845-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William R Antonello

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
 Sunrise FL 33323-2862

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Marketing Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-3321-20-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. William R Antonello

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
 Sunrise FL 33323-2862

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Segment Marketing Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-3315-20-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Raegan M Armata

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-198-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Raegan M Armata**

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
Marketing Product Sr Director

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

Transaction ID : 20160516-198-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ann H Asbaty**

Mailing Address 44 Whippany Rd

City	State	Zip Code
Morristown	NJ	07960-4558

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

Transaction ID : 20160502-292-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ann H Asbaty**

Mailing Address 44 Whippany Rd

City	State	Zip Code
Morristown	NJ	07960-4558

FEC ID number of contributing federal political committee.

C

Name of Employer
CT GENERAL LIFE INSURANCE CO

Occupation
General Manager

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

Transaction ID : 20160516-292-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jacquelyn A Aube**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
VP Customer Adoption Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1572-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jacquelyn A Aube**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
VP Customer Adoption Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1572-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lisa R Bacus**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-22533-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

312.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lisa R Bacus**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-22447-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark Bailey**

Mailing Address 1640 Dallas Pkwy

City State Zip Code  
 Plano TX 75093-4515

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-10313-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mark Bailey**

Mailing Address 1640 Dallas Pkwy

City State Zip Code  
 Plano TX 75093-4515

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-10277-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

292.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rick L Bailey**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-13687-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rick L Bailey**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-13635-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amy R Bennett**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1443-20-23**

Amount of Each Receipt this Period

10.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

60.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Amy R Bennett**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Information Protection Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1443-20-23**

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeff Berardo**

Mailing Address 44 Whippany Rd

City State Zip Code  
 Morristown NJ 07960-4558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1910-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jeff Berardo**

Mailing Address 44 Whippany Rd

City State Zip Code  
 Morristown NJ 07960-4558

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Sales Director-Direct Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1907-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kim Bimestefer**

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7381-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kim Bimestefer**

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7362-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. John J Bogan**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-20833-20-23**

Amount of Each Receipt this Period

150.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John J Bogan**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-20757-20-23**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eva C Borden**

Mailing Address 514 W Lane Ct

City Panora State IA Zip Code 50216-1145

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2186-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Eva C Borden**

Mailing Address 514 W Lane Ct

City Panora State IA Zip Code 50216-1145

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2180-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mark L Boxer**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

EVP CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8494-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark L Boxer**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

EVP CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8467-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Conway Brew**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-6920-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

409.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Conway Brew**

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-6901-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Brett C Browchuk**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corp.

Occupation  
 SVP Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-12445-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Brett C Browchuk**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corp.

Occupation  
 SVP Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-12401-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

409.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William Brown**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
 Chattanooga TN 37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7461-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. William Brown**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
 Chattanooga TN 37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7441-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kelly K Brundin**

Mailing Address 610 Meadowview Ct

City State Zip Code  
 Maple Glen PA 19002-2330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 VP Financial Plng & Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2725-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kelly K Brundin

Mailing Address 610 Meadowview Ct

City

Maple Glen

State

PA

Zip Code

19002-2330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Financial Plng &amp; Analysis

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-2719-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Timothy D Buckley

Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : 20160502-11591-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Timothy D Buckley

Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Internation

Occupation

VP Treasury

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-11550-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nancy B Bucklin**

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-5089-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nancy B Bucklin**

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-5074-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mark Butler**

Mailing Address 2223 Washington St

City

Newton

State

MA

Zip Code

02462-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8141-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Mark Butler**

Mailing Address 2223 Washington St

City

Newton

State

MA

Zip Code

02462-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8118-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. William C Carlson**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Real Estate Sr Managing Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-635-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. William C Carlson**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Real Estate Sr Managing Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-635-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

195.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Karen K Cierzan**

Mailing Address 11095 Viking Dr

City

Eden Prairie

State

MN

Zip Code

55344-7223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CIGNA BEHAVIORAL HEALTH, INC.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-5113-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Karen K Cierzan**

Mailing Address 11095 Viking Dr

City

Eden Prairie

State

MN

Zip Code

55344-7223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CIGNA BEHAVIORAL HEALTH, INC.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-5098-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Robert F Clark**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-340-20-23**

Amount of Each Receipt this Period

90.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Robert F Clark**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Coli

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-340-20-23**

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Barbara Coburn**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-25178-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Barbara Coburn**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-25074-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gina L Collins**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9809-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gina L Collins**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9773-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Timothy K Conners**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 IT Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-19072-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Timothy K Conners**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-19004-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael Conrad**

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.82

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1976-20-23**

Amount of Each Receipt this Period

28.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael Conrad**

Mailing Address 400 N Brand Blvd

City Glendale State CA Zip Code 91203-2311

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager-National Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.82

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1970-20-23**

Amount of Each Receipt this Period

40.87

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

119.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eric P Consolazio**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1585-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eric P Consolazio**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1585-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Natalie B Corbett**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-21779-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Natalie B Corbett**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-21698-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David M Cordani**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : 20160502-409-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. David M Cordani**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-410-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

434.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Daniel J Cozzo**

Mailing Address 31792 Via Coyote

City

Coto De Caza

State

CA

Zip Code

92679-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9196-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Daniel J Cozzo**

Mailing Address 31792 Via Coyote

City

Coto De Caza

State

CA

Zip Code

92679-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Operations Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9162-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Stephen W Crawford**

Mailing Address 216 B Ave

City

Coronado

State

CA

Zip Code

92118-1955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-11415-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Stephen W Crawford**

Mailing Address 216 B Ave

City State Zip Code  
 Coronado CA 92118-1955

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-11375-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rebecca A Croes**

Mailing Address 2900 North Loop W

City State Zip Code  
 Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30260-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Rebecca A Croes**

Mailing Address 2900 North Loop W

City State Zip Code  
 Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30107-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Andrew D Crooks**

Mailing Address 2701 N Rocky Point Dr

City State Zip Code  
 Tampa FL 33607-5917

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-7268-20-23

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Andrew D Crooks**

Mailing Address 2701 N Rocky Point Dr

City State Zip Code  
 Tampa FL 33607-5917

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-7248-20-23

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Balthasar A Crosson**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-2335-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Balthasar A Crosson**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2329-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Brian Cuddeback**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-10335-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Brian Cuddeback**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-10299-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory J Czar**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFE INS. CO. OF NORTH AMERICA

Occupation  
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8626-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregory J Czar**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFE INS. CO. OF NORTH AMERICA

Occupation  
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8599-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kristin Damato**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2151-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kristin Damato**

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-2145-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Johannes M De Jong**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-212-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Johannes M De Jong**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-212-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

170.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Christopher De Rosa**

Mailing Address 26 Executive Park

City State Zip Code  
 Irvine CA 92614-6739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1492-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christopher De Rosa**

Mailing Address 26 Executive Park

City State Zip Code  
 Irvine CA 92614-6739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1492-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Elizabeth Deforest**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Audit Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8499-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Deforest**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Audit Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8472-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cyanne L Demchak**

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-15183-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Cyanne L Demchak**

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15129-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michelle Demonteverde**

Mailing Address 400 N Brand Blvd

City State Zip Code  
 Glendale CA 91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-12594-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michelle Demonteverde**

Mailing Address 400 N Brand Blvd

City State Zip Code  
 Glendale CA 91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Provider Contracting Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-12550-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Brendan J Devine**

Mailing Address 601 Pennsylvania Ave NW

City State Zip Code  
 Washington DC 20004-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23599-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

110.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brendan J Devine**

Mailing Address 601 Pennsylvania Ave NW

City

Washington

State

DC

Zip Code

20004-2601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

580.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23500-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Constance J Dimanno**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8972-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Constance J Dimanno**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8940-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeannine Doherty**

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

465.91

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-26-20-23**

Amount of Each Receipt this Period

14.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeannine Doherty**

Mailing Address 5310 E High St

City

Phoenix

State

AZ

Zip Code

85054-5469

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

465.91

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-26-20-23**

Amount of Each Receipt this Period

9.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marcus J Doyle**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Strat & Bus Develop Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-12456-20-23**

Amount of Each Receipt this Period

65.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

89.24

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Marcus J Doyle**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Strat & Bus Develop Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-12413-20-23**

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stephen D Drew**

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23182-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Stephen D Drew**

Mailing Address 175 W Jackson Blvd

City

Chicago

State

IL

Zip Code

60604-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23089-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

215.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rosanna M Durruthy**

Mailing Address 1527 Seabreeze Blvd

City State Zip Code  
Fort Lauderdale FL 33316-3213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Diversity Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-17583-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rosanna M Durruthy**

Mailing Address 1527 Seabreeze Blvd

City State Zip Code  
Fort Lauderdale FL 33316-3213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Diversity Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-17520-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael D Elmore**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Chief Info Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-18259-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael D Elmore**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Chief Info Security Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-18196-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Leslie Enright**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8189-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Leslie Enright**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8166-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brian Evanko**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1592-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brian Evanko**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1592-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott E Evelyn**

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
 Sunrise FL 33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation  
 General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-13527-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott E Evelyn**

Mailing Address 1571 Sawgrass Corporate Pkwy

City	State	Zip Code
Sunrise	FL	33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-13477-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lori Feldman**

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Social Media Mktg Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-19868-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lori Feldman**

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Social Media Mktg Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-19797-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael L Fessenden**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-22931-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Scott M Filiault**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Informatics

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-219-20-23**

Amount of Each Receipt this Period

130.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott M Filiault**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Informatics

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-219-20-23**

Amount of Each Receipt this Period

130.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

310.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mary Fischer-McKee**

Mailing Address 11029 W Crestbrook Dr

City

State

Zip Code

Sun City

AZ

85351-1057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Cigna Corporation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-11307-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mary Fischer-McKee**

Mailing Address 11029 W Crestbrook Dr

City

State

Zip Code

Sun City

AZ

85351-1057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Cigna Corporation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-11268-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Susan P Fitzpatrick**

Mailing Address 140 E 45th St

City

State

Zip Code

New York

NY

10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

CT GENERAL LIFE INSURANCE CO

Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1490-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Susan P Fitzpatrick**

Mailing Address 140 E 45th St

City  
New York

State Zip Code  
NY 10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Clinical Program Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-1490-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Patty S Fontneau**

Mailing Address 8505 E Orchard Rd

City  
Greenwood Village

State Zip Code  
CO 80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-26251-20-23**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Patty S Fontneau**

Mailing Address 8505 E Orchard Rd

City  
Greenwood Village

State Zip Code  
CO 80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-26135-20-23**

Amount of Each Receipt this Period

80.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

210.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mark Foulke**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-30376-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark Foulke**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-30223-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Philip A Fridl**

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-8569-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

200.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Philip A Fridl**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
 Chattanooga TN 37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-8542-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tyrone M Fripp**

Mailing Address 140 E 45th St

City State Zip Code  
 New York NY 10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-13021-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Tyrone M Fripp**

Mailing Address 140 E 45th St

City State Zip Code  
 New York NY 10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

HR Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-12973-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Herbert A Fritch**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

President Cigna HealthSpring

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29410-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Herbert A Fritch**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

President Cigna HealthSpring

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-29264-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Peter R Gardner**

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30214-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

434.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter R Gardner

Mailing Address 2900 North Loop W

City State Zip Code  
Houston TX 77092-8841

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-30061-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Willis H Gee

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : 20160502-8222-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Willis H Gee

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-8199-20-23

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David J Giannoni**

Mailing Address 612 Wheelers Farms Rd

City  
MilfordState  
CTZip Code  
06461-1673FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

**Transaction ID : 20160502-3488-20-23**

Amount of Each Receipt this Period

6.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David J Giannoni**

Mailing Address 612 Wheelers Farms Rd

City  
MilfordState  
CTZip Code  
06461-1673FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-3481-20-23**

Amount of Each Receipt this Period

6.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jennifer R Gilbert**

Mailing Address 6401 Poplar Ave

City  
MemphisState  
TNZip Code  
38119-4823FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

**Transaction ID : 20160502-31001-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.46

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jennifer R Gilbert**

Mailing Address 6401 Poplar Ave

City

Memphis

State

TN

Zip Code

38119-4823

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30847-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Debra L Glover**

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29433-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Debra L Glover**

Mailing Address 601 Mainstream Dr

City

Nashville

State

TN

Zip Code

37228-1203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-29287-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John P Godsill**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 SVP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8247-20-23**

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John P Godsill**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 SVP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8223-20-23**

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kristen Gorodetzer**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 HR&S Talent Optimization

Occupation  
 VP Total Rewards & Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1185.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-10255-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

440.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kristen Gorodetzer**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer  
HR&S Talent Optimization

Occupation  
VP Total Rewards & Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1185.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-10219-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tania K Graves**

Mailing Address 8179 Penn Pl

City Indianapolis State IN Zip Code 46250-4265

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Marketing Comm Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-5441-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tania K Graves**

Mailing Address 8179 Penn Pl

City Indianapolis State IN Zip Code 46250-4265

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Marketing Comm Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-5425-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

270.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Richard Gray**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1730-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Richard Gray**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strat And Bus Develop Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1729-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. William F Gray**

Mailing Address 3 Waterside Xing

City State Zip Code  
 Windsor CT 06095-1561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24383-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William F Gray**

Mailing Address 3 Waterside Xing

City

Windsor

State

CT

Zip Code

06095-1561

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-24280-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Allison B Greco**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1267-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Allison B Greco**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1267-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Benjy R Green**

Mailing Address 2208 Highway 121

City

Bedford

State

TX

Zip Code

76021-5981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29002-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Benjy R Green**

Mailing Address 2208 Highway 121

City

Bedford

State

TX

Zip Code

76021-5981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-28858-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bruce M Grimm**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6168-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

135.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffrey C Gross**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Cigna Corp. Information Protection Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-15980-20-23**

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeffrey C Gross**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Cigna Corp. Information Protection Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15923-20-23**

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Beth C Guest**

Mailing Address 530 Great Circle Rd

City State Zip Code  
 Nashville TN 37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Cigna Corp. Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-22284-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

98.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Beth C Guest**

Mailing Address 530 Great Circle Rd

City  
NashvilleState  
TNZip Code  
37228-1309FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-22201-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David D Guilmette**

Mailing Address 900 Cottage Grove Rd

City  
BloomfieldState  
CTZip Code  
06002-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-16803-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. David D Guilmette**

Mailing Address 900 Cottage Grove Rd

City  
BloomfieldState  
CTZip Code  
06002-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-16740-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

434.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Theresa A Hall**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-14089-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Theresa A Hall**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-14036-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kerin L Hallquist**

Mailing Address 300 Bellevue Pkwy

Ste 101

City

Wilmington

State

DE

Zip Code

19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-555-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Kerin L Hallquist**

Mailing Address 300 Bellevue Pkwy  
Ste 101

City State Zip Code  
Wilmington DE 19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Underwriting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
05 / 19 / 2016

**Transaction ID : 20160516-555-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Julian J Harris**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
SVP Strategic Operations Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.00

Date of Receipt

MM / DD / YYYY  
05 / 05 / 2016

**Transaction ID : 20160502-32502-20-23**

Amount of Each Receipt this Period

153.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Julian J Harris**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
SVP Strategic Operations Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1071.00

Date of Receipt

MM / DD / YYYY  
05 / 19 / 2016

**Transaction ID : 20160516-32326-20-23**

Amount of Each Receipt this Period

153.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

331.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Joan B Harvey**

Mailing Address 65 S River Rd

City State Zip Code  
Stuart FL 34996-6400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-20835-20-23**

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Joan B Harvey**

Mailing Address 65 S River Rd

City State Zip Code  
Stuart FL 34996-6400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Consumer Health Engagement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-20759-20-23**

Amount of Each Receipt this Period

160.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tobin B Hawkins**

Mailing Address 2700 Post Oak Blvd

City State Zip Code  
Houston TX 77056-5784

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Enterprise Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-4705-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

345.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tobin B Hawkins**

Mailing Address 2700 Post Oak Blvd

City

Houston

State

TX

Zip Code

77056-5784

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Enterprise Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-4692-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregory T Hicks**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-10068-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Gregory T Hicks**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-10032-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

255.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Christopher J Hocevar**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8203-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christopher J Hocevar**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Multi-Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8180-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Carole Hodsdon**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2719-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

330.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Carole Hodsdon**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2713-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael Horlacher**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2616-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael Horlacher**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2610-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

220.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tamara Horwitz**

Mailing Address 3430 List Pl

City	State	Zip Code
Minneapolis	MN	55416-4559

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-15128-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tamara Horwitz**

Mailing Address 3430 List Pl

City	State	Zip Code
Minneapolis	MN	55416-4559

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-15074-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael L Howell**Mailing Address 255 Primera Blvd  
Ste 264

City	State	Zip Code
Lake Mary	FL	32746-2148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-20886-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael L Howell**

Mailing Address 255 Primera Blvd  
Ste 264

City Lake Mary State FL Zip Code 32746-2148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-20810-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Julia M Huggins**

Mailing Address 111 S Calvert St

City Baltimore State MD Zip Code 21202-6174

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-450-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Julia M Huggins**

Mailing Address 111 S Calvert St

City Baltimore State MD Zip Code 21202-6174

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-451-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jay L Hurt**

Mailing Address 2900 North Loop W

City State Zip Code  
Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30653-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jay L Hurt**

Mailing Address 2900 North Loop W

City State Zip Code  
Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30499-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Deborah L Hutton**

Mailing Address 20 Hilltop Dr

City State Zip Code  
West Hartford CT 06107-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-26231-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Deborah L Hutton**

Mailing Address 20 Hilltop Dr

City

West Hartford

State

CT

Zip Code

06107-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-26115-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Tamara A Igunbor**

Mailing Address W144N7150 Terrace Dr

City

Menomonee Falls

State

WI

Zip Code

53051-0930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24519-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tamara A Igunbor**

Mailing Address W144N7150 Terrace Dr

City

Menomonee Falls

State

WI

Zip Code

53051-0930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-24416-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Crystal Jack**

Mailing Address 1171 Arroyo Grande Dr

City State Zip Code  
 Sacramento CA 95864-2843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24413-20-23**

Amount of Each Receipt this Period

116.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Crystal Jack**

Mailing Address 1171 Arroyo Grande Dr

City State Zip Code  
 Sacramento CA 95864-2843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-24310-20-23**

Amount of Each Receipt this Period

116.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. John M Jacobs**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2492-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

267.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John M Jacobs**

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2486-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Clifton S Jacobson**

Mailing Address 7034 Lakewood Blvd

City State Zip Code  
Dallas TX 75214-3558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30597-20-23**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Clifton S Jacobson**

Mailing Address 7034 Lakewood Blvd

City State Zip Code  
Dallas TX 75214-3558

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30443-20-23**

Amount of Each Receipt this Period

192.30

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

419.60



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William S Jameson**

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Managing Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-5606-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. William S Jameson**

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Managing Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-5590-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Nicole S Jones**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP and General Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-11454-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

242.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 74 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Nicole S Jones**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP and General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-11414-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Shadrach H Jones**

Mailing Address 2000 Park Lane Dr

City State Zip Code  
 Pittsburgh PA 15275-1114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23641-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Shadrach H Jones**

Mailing Address 2000 Park Lane Dr

City State Zip Code  
 Pittsburgh PA 15275-1114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23542-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

242.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Teresa R Jordan**

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-29413-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Teresa R Jordan**

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Managing Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-29267-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott Josephs**

Mailing Address 701 Corporate Center Dr

City

Raleigh

State

NC

Zip Code

27607-5084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Total Medical

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-6101-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Scott Josephs**

Mailing Address 701 Corporate Center Dr

City Raleigh State NC Zip Code 27607-5084

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
VP Total Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6085-20-23**

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Jill C Kaleta**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-25473-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Jill C Kaleta**

Mailing Address 601 Pennsylvania Ave NW

City Washington State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-25364-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

160.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Shankar Kalyanasundaram**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8894-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Shankar Kalyanasundaram**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8863-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Christopher H Keffer**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29372-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Christopher H Keffer**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Network Opns Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-29226-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Edward S Kim**Mailing Address 25500 N Norterra Dr  
Bldg B

City

Phoenix

State

AZ

Zip Code

85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-18801-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Edward S Kim**Mailing Address 25500 N Norterra Dr  
Bldg B

City

Phoenix

State

AZ

Zip Code

85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-18737-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gary E Kirkner**

Mailing Address 89 Surfsong Rd

City State Zip Code  
 Kiawah Island SC 29455-5756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 LIFE INS. CO. OF NORTH AMERICA

Occupation  
 VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8300-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gary E Kirkner**

Mailing Address 89 Surfsong Rd

City State Zip Code  
 Kiawah Island SC 29455-5756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 LIFE INS. CO. OF NORTH AMERICA

Occupation  
 VP Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8276-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kristinn K Klunkert**

Mailing Address 2900 North Loop W

City State Zip Code  
 Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30667-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

330.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kristinn K Klunkert**

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30513-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. James Kucharczyk**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-18660-20-23**

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. James Kucharczyk**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-18596-20-23**

Amount of Each Receipt this Period

80.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

260.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kenneth P Langevin**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1209-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kenneth P Langevin**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1209-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. R Lara**

Mailing Address 25600 N Norterra Dr  
 Bldg A

City State Zip Code  
 Phoenix AZ 85085-8201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-2435-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. R Lara**

Mailing Address 25600 N Norterra Dr  
Bldg A

City State Zip Code  
Phoenix AZ 85085-8201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-2429-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amy C Lazzaro**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-20645-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Amy C Lazzaro**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Government Affairs Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-20569-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bryan Lees**

Mailing Address 3 Waterside Xing

City Windsor State CT Zip Code 06095-1561

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-17362-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bryan Lees**

Mailing Address 3 Waterside Xing

City Windsor State CT Zip Code 06095-1561

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Technical Support Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-17299-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Thulani M Legrier**

Mailing Address 900 Cottage Grove Rd

City Bloomfield State CT Zip Code 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.60

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-27451-20-23**

Amount of Each Receipt this Period

49.28

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

99.28

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thulani M Legrier**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Project Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-27322-20-23

Amount of Each Receipt this Period

49.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Robyn Leland**

Mailing Address 2208 Highway 121

City State Zip Code  
 Bedford TX 76021-5981

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-29296-20-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Robyn Leland**

Mailing Address 2208 Highway 121

City State Zip Code  
 Bedford TX 76021-5981

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-29150-20-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

99.28

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gary Levenbach**Mailing Address 300 Bellevue Pkwy  
Ste 101

City	State	Zip Code
Wilmington	DE	19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE COOccupation  
Actuarial Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-8627-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gary Levenbach**Mailing Address 300 Bellevue Pkwy  
Ste 101

City	State	Zip Code
Wilmington	DE	19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE COOccupation  
Actuarial Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-8600-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Christopher J Lockery**

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE COOccupation  
Information Protection Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-9183-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Christopher J Lockery

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Information Protection Sr Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-9149-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Jane E Loftus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Human Resources Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : 20160502-12946-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Jane E Loftus

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Human Resources Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-12899-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William M Lopez**

Mailing Address 1006 Columbine Rd

City Asheville State NC Zip Code 28803-1951

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-11162-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. William M Lopez**

Mailing Address 1006 Columbine Rd

City Asheville State NC Zip Code 28803-1951

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-11123-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Scott A Macchi**

Mailing Address 900 Cottage Grove Rd

City Bloomfield State CT Zip Code 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-733-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott A Macchi**

Mailing Address 900 Cottage Grove Rd

City	State	Zip Code
Bloomfield	CT	06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE COOccupation  
Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-733-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kenneth Malley**

Mailing Address 764 W Saddle River Rd

City	State	Zip Code
Ho Ho Kus	NJ	07423-1645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.Occupation  
Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

**Transaction ID : 20160502-25174-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kenneth Malley**

Mailing Address 764 W Saddle River Rd

City	State	Zip Code
Ho Ho Kus	NJ	07423-1645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.Occupation  
Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-25070-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

155.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 89 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. A. Maltby**

Mailing Address 300 Bellevue Pkwy  
Ste 101

City State Zip Code  
Wilmington DE 19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-17707-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. A. Maltby**

Mailing Address 300 Bellevue Pkwy  
Ste 101

City State Zip Code  
Wilmington DE 19809-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-17644-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Matthew G Manders**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1852-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

292.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Matthew G Manders**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Pres US Mkts & Global HC Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-1850-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark P Marsters**Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer  
 LIFE INS. CO. OF NORTH AMERICA

Occupation  
 VP Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-9018-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Mark P Marsters**Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer  
 LIFE INS. CO. OF NORTH AMERICA

Occupation  
 VP Service Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-8986-20-23

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

442.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas J Martel**

Mailing Address 2223 Washington St

City State Zip Code  
 Newton MA 02462-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8752-20-23**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thomas J Martel**

Mailing Address 2223 Washington St

City State Zip Code  
 Newton MA 02462-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 RVP Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8725-20-23**

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tim May**

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CIGNA INTERNATIONAL SVCS., INC

Occupation  
 Compensation Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-6269-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tim May**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer  
CIGNA INTERNATIONAL SVCS., INC

Occupation  
Compensation Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6253-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Louise M McCagg**

Mailing Address 3601 Odonnell St

City Baltimore State MD Zip Code 21224-5238

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
App Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29350-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Louise M McCagg**

Mailing Address 3601 Odonnell St

City Baltimore State MD Zip Code 21224-5238

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
App Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-29204-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Julie A McCarter

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-14394-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Julie A McCarter

Mailing Address 8505 E Orchard Rd

City State Zip Code  
 Greenwood Village CO 80111-5002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Marketing Product Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-14340-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Thomas A McCarthy

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-8336-20-23

Amount of Each Receipt this Period

185.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

285.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas A McCarthy**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8311-20-23**

Amount of Each Receipt this Period

185.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Peter W McCauley**

Mailing Address 525 W Monroe St

City Chicago State IL Zip Code 60661-3629

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-17026-20-23**

Amount of Each Receipt this Period

22.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. William L McDowell**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

VP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7630-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

232.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William L McDowell**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFE INS. CO. OF NORTH AMERICA

Occupation  
VP Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7610-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sheila McGinley-Graziosi**

Mailing Address 900 Cottage Grove Rd

City Bloomfield State CT Zip Code 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1265-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Sheila McGinley-Graziosi**

Mailing Address 900 Cottage Grove Rd

City Bloomfield State CT Zip Code 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1265-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kayla McKenzie-Small**

Mailing Address 3 Huntington Quad

City State Zip Code  
 Melville NY 11747-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9225-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Kayla McKenzie-Small**

Mailing Address 3 Huntington Quad

City State Zip Code  
 Melville NY 11747-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9191-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael T McKinney**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Strategic Sourcing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9957-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael T McKinney**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Strategic Sourcing Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9921-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Susan E McMurray**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Accounting Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-419-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Susan E McMurray**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Accounting Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-420-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

75.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory J Miller**

Mailing Address 9450 Norwood Dr

City

Brentwood

State

TN

Zip Code

37027-8657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29384-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregory J Miller**

Mailing Address 9450 Norwood Dr

City

Brentwood

State

TN

Zip Code

37027-8657

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-29238-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Steven Mintz**

Mailing Address 3124 Matoma Circle

City

Thompson Station

State

TN

Zip Code

37179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-17428-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Steven Mintz**

Mailing Address 3124 Matoma Circle

City

Thompson Station

State

TN

Zip Code

37179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-17365-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Laura Minzer**

Mailing Address 2570 Tozer Rd

City

Springfield

State

IL

Zip Code

62707-2651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24006-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Laura Minzer**

Mailing Address 2570 Tozer Rd

City

Springfield

State

IL

Zip Code

62707-2651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23904-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Morris D Mirabella**

Mailing Address 2701 N Rocky Point Dr

City

Tampa

State

FL

Zip Code

33607-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-5882-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Morris D Mirabella**

Mailing Address 2701 N Rocky Point Dr

City

Tampa

State

FL

Zip Code

33607-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-5866-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank A Monahan**

Mailing Address 7400 W 110th St

City

Overland Park

State

KS

Zip Code

66210-2358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9953-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Frank A Monahan**

Mailing Address 7400 W 110th St

City

Overland Park

State

KS

Zip Code

66210-2358

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

General Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9917-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Melanie N Monchick**

Mailing Address 701 Corporate Center Dr

City

Raleigh

State

NC

Zip Code

27607-5084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Clinical Program Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-5639-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Melanie N Monchick**

Mailing Address 701 Corporate Center Dr

City

Raleigh

State

NC

Zip Code

27607-5084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INT'L REHAB. ASSOCIATES, INC.

Occupation

Clinical Program Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-5623-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

200.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael W Moran

Mailing Address 525 W Monroe St

City State Zip Code  
 Chicago IL 60661-3629

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-16318-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Michael W Moran

Mailing Address 525 W Monroe St

City State Zip Code  
 Chicago IL 60661-3629

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-16259-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Matthew S Morris

Mailing Address 530 Great Circle Rd

City State Zip Code  
 Nashville TN 37228-1309

FEC ID number of contributing federal political committee.

C

Name of Employer

Healthspring

Occupation

VP Segment Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-29375-20-23

Amount of Each Receipt this Period

192.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

292.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 103 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Matthew S Morris**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Healthspring

Occupation

VP Segment Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9		2	0	1	6		

**Transaction ID : 20160516-29229-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jennifer R Motta**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	5		2	0	1	6		

**Transaction ID : 20160502-20165-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jennifer R Motta**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Development Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	9		2	0	1	6		

**Transaction ID : 20160516-20094-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

242.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eric C Motter**

Mailing Address 1401 Spanish Trail Ct

City State Zip Code  
 Blacklick OH 43004-9803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Market Insight Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7372-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eric C Motter**

Mailing Address 1401 Spanish Trail Ct

City State Zip Code  
 Blacklick OH 43004-9803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Market Insight Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7353-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Alan M Muney**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-16867-20-23**

Amount of Each Receipt this Period

175.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

275.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 105 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Alan M Muney**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Total Med/Chief Med Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-16804-20-23**

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John M Murabito**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources &amp; Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-9277-20-23**

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. John M Murabito**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

EVP Human Resources &amp; Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-9243-20-23**

Amount of Each Receipt this Period

154.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

483.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Noreen Nageotte**

Mailing Address 28205 W Oviatt Rd

City State Zip Code  
 Bay Village OH 44140-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-6316-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Noreen Nageotte**

Mailing Address 28205 W Oviatt Rd

City State Zip Code  
 Bay Village OH 44140-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6300-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Manish Naik**

Mailing Address 2066 Madrillon Rd

City State Zip Code  
 Vienna VA 22182-3723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-19345-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

225.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 107 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Manish Naik**

Mailing Address 2066 Madrillon Rd

City	State	Zip Code
Vienna	VA	22182-3723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-19276-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Laurinda M Newell**

Mailing Address 26 Executive Park

City	State	Zip Code
Irvine	CA	92614-6739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

**Transaction ID : 20160502-9113-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Laurinda M Newell**

Mailing Address 26 Executive Park

City	State	Zip Code
Irvine	CA	92614-6739

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-9079-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

125.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Daniel Nicoll**

Mailing Address 3 Huntington Quad

City State Zip Code  
Melville NY 11747-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1764-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Daniel Nicoll**

Mailing Address 3 Huntington Quad

City State Zip Code  
Melville NY 11747-4602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Medical Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1763-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael T Nole**

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
Sunrise FL 33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-16021-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

103.86

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 109 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael T Nole**

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
 Sunrise FL 33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15964-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Richard S Novack**

Mailing Address 3500 Piedmont Rd NE

City State Zip Code  
 Atlanta GA 30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-15877-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Richard S Novack**

Mailing Address 3500 Piedmont Rd NE

City State Zip Code  
 Atlanta GA 30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15820-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eliana M Nunez**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operating Effectiveness Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1075-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eliana M Nunez**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operating Effectiveness Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1075-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. John Oates**

Mailing Address 1701 Patterson Rd

City State Zip Code  
 Austin TX 78733-6500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-11395-20-23**

Amount of Each Receipt this Period

192.30

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

292.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John Oates**

Mailing Address 1701 Patterson Rd

City  
AustinState  
TXZip Code  
78733-6500FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1923.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-11355-20-23**

Amount of Each Receipt this Period

192.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lester Keith Osborne**

Mailing Address 13759 E Paradise Dr

City  
ScottsdaleState  
AZZip Code  
85259-3709FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-5934-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Lester Keith Osborne**

Mailing Address 13759 E Paradise Dr

City  
ScottsdaleState  
AZZip Code  
85259-3709FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-5918-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

292.30

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brian C Ough**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFE INS. CO. OF NORTH AMERICA

Occupation  
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7141-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Brian C Ough**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFE INS. CO. OF NORTH AMERICA

Occupation  
Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7121-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Katherine Overbye**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Underwriting Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1247-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

80.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Katherine Overbye**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1247-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Michele Paige**

Mailing Address 12 Millbrook Ct

City

Livingston

State

NJ

Zip Code

07039-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-22056-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **c. Michele Paige**

Mailing Address 12 Millbrook Ct

City

Livingston

State

NJ

Zip Code

07039-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-21973-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eric P Palmer**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Bus Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-5133-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eric P Palmer**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

SVP Bus Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-5118-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jeffery P Panter**

Mailing Address 7555 Goodwin Rd

City State Zip Code  
 Chattanooga TN 37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-4232-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

419.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffery P Panter**

Mailing Address 7555 Goodwin Rd

City

Chattanooga

State

TN

Zip Code

37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Strategic Sourcing Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-4221-20-23**

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Christian C Paoletti**

Mailing Address 1571 Sawgrass Corporate Pkwy

City

Sunrise

State

FL

Zip Code

33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-8838-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Christian C Paoletti**

Mailing Address 1571 Sawgrass Corporate Pkwy

City

Sunrise

State

FL

Zip Code

33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Financial Analysis Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8808-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

95.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Mark A Parsons**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
SVP Reinsurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-398-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Mark A Parsons**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
SVP Reinsurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-398-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Allen C Perez**

Mailing Address 2900 North Loop W

City State Zip Code  
Houston TX 77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
Business Developmt Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-30649-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Allen C Perez**

Mailing Address 2900 North Loop W

City

Houston

State

TX

Zip Code

77092-8841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Developmt Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-30495-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David C Peterson**

Mailing Address 913 Woodhill Cir

City

Watertown

State

MN

Zip Code

55388-9267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-5037-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. David C Peterson**

Mailing Address 913 Woodhill Cir

City

Watertown

State

MN

Zip Code

55388-9267

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-5022-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Heather R Peterson**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29501-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Heather R Peterson**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-29355-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Danthu T Phan**

Mailing Address 1601 Chestnut St  
 # 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-10039-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Danthu T Phan**Mailing Address 1601 Chestnut St  
# 2

City	State	Zip Code
Philadelphia	PA	19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-10003-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thomas M Philibotte**

Mailing Address 7555 Goodwin Rd

City	State	Zip Code
Chattanooga	TN	37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-15-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Thomas M Philibotte**

Mailing Address 7555 Goodwin Rd

City	State	Zip Code
Chattanooga	TN	37421-3183

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-15-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael J Phillips**

Mailing Address 525 W Monroe St

City State Zip Code  
 Chicago IL 60661-3629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-24265-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michael J Phillips**

Mailing Address 525 W Monroe St

City State Zip Code  
 Chicago IL 60661-3629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-24162-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ena Pierce**

Mailing Address 5206 Downing Rd

City State Zip Code  
 Baltimore MD 21212-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-29332-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ena Pierce**

Mailing Address 5206 Downing Rd

City

Baltimore

State

MD

Zip Code

21212-4114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-29186-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeremiah Pierson**

Mailing Address 317 Spy Glass Hill Rd

City

Bath

State

PA

Zip Code

18014-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

**Transaction ID : 20160502-21132-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jeremiah Pierson**

Mailing Address 317 Spy Glass Hill Rd

City

Bath

State

PA

Zip Code

18014-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Architecture Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	6

**Transaction ID : 20160516-21051-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Charles C Pitts**

Mailing Address 11016 Rushmore Dr

City

Charlotte

State

NC

Zip Code

28277-3474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-11564-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Charles C Pitts**

Mailing Address 11016 Rushmore Dr

City

Charlotte

State

NC

Zip Code

28277-3474

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-11523-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. John C Prather**Mailing Address 25500 N Norterra Dr  
Bldg B

City

Phoenix

State

AZ

Zip Code

85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Financial Analysis Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-7444-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

75.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John C Prather**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Financial Analysis Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-7425-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jonathan M Prokup**

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Managing Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-20543-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jonathan M Prokup**

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Managing Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-20468-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Philip Rabinowitz**

Mailing Address 3000 Park Lane Dr

City

Pittsburgh

State

PA

Zip Code

15275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-10768-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Philip Rabinowitz**

Mailing Address 3000 Park Lane Dr

City

Pittsburgh

State

PA

Zip Code

15275

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-10730-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. David T Raccagni**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-6127-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David T Raccagni**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6111-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Edward J Rado**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corp.

Occupation  
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-15612-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Edward J Rado**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corp.

Occupation  
 Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15556-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eugene J Rapisardi**

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-13585-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Eugene J Rapisardi**

Mailing Address 400 N Brand Blvd

City

Glendale

State

CA

Zip Code

91203-2311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-13534-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Andrew W Reeves**

Mailing Address 3500 Piedmont Rd NE

City

Atlanta

State

GA

Zip Code

30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-12742-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Andrew W Reeves**

Mailing Address 3500 Piedmont Rd NE

City State Zip Code  
Atlanta GA 30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-12697-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Thomas B Richards**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Strategy and Bus Developmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-581-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Thomas B Richards**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Strategy and Bus Developmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-581-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 128 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffrey T Rigg**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-18496-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeffrey T Rigg**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-18433-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Catherine M Riley**

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

FEC ID number of contributing federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1822-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

305.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 129 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Catherine M Riley**

Mailing Address 4000 Faber Place Dr

City Charleston State SC Zip Code 29405-8585

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1821-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Cathryn Riley**

Mailing Address 25500 N Norterra Dr  
Bldg B

City Phoenix State AZ Zip Code 85085-8200

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cigna Corp.

Occupation  
Clinical Program Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-15855-20-23**

Amount of Each Receipt this Period

21.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Kevin L Ritchie**

Mailing Address 140 E 45th St

City New York State NY Zip Code 10017-3144

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Manager Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-739-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

151.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kevin L Ritchie**

Mailing Address 140 E 45th St

City  
New York

State Zip Code  
NY 10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Manager Account Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-739-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. James Robinson**

Mailing Address 9 Griffin Rd N

City  
Windsor

State Zip Code  
CT 06095-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Infrastructure Engineer Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-283-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. James Robinson**

Mailing Address 9 Griffin Rd N

City  
Windsor

State Zip Code  
CT 06095-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Infrastructure Engineer Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-283-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John F Roche**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23332-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John F Roche**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23238-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ruth T Rose**

Mailing Address 3408 Nottingham Rd

City State Zip Code  
 Westminster MD 21157-8304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23325-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ruth T Rose**

Mailing Address 3408 Nottingham Rd

City

Westminster

State

MD

Zip Code

21157-8304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business IT Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23231-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John Rottkamp**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1660-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. John Rottkamp**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Enterprise Underwriting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1659-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cynthia Ryan**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 VP Talent Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1471-20-23**

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Cynthia Ryan**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 VP Talent Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

614.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1471-20-23**

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. James J Saad**

Mailing Address 1640 Dallas Pkwy

City State Zip Code  
 Plano TX 75093-4515

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corporation

Occupation  
 Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-11022-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

204.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 134 OF 173

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. James J Saad

Mailing Address 1640 Dallas Pkwy

City  
PlanoState  
TXZip Code  
75093-4515FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corporation

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-10983-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Richard B Salmon

Mailing Address 900 Cottage Grove Rd

City  
BloomfieldState  
CTZip Code  
06002-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : 20160502-1694-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Richard B Salmon

Mailing Address 900 Cottage Grove Rd

City  
BloomfieldState  
CTZip Code  
06002-2920FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Medical Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

Transaction ID : 20160516-1693-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jon L Sandberg**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-20444-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jon L Sandberg**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Business Comm Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-20370-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paul A Sanford**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

VP Operating Effectiveness

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7156-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

342.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Paul A Sanford**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 VP Operating Effectiveness

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-7136-20-23**

Amount of Each Receipt this Period

192.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Frank Sataline**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-399-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Frank Sataline**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 SVP Chief Investment Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-399-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

432.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David A Savino**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-552-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. David A Savino**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-552-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Ann M Schaefer-Reid**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Marketing Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-31636-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

100.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ann M Schaefer-Reid

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Segment Marketing Sr Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-31473-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. David S Scheibe

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Treasury Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-1231-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. David S Scheibe

Mailing Address 1601 Chestnut St  
# 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Treasury Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-1231-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rajesh S Shrestha**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-16740-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Rajesh S Shrestha**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-16677-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kenneth R Silvay**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Accounting Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-905-20-23**

Amount of Each Receipt this Period

62.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

112.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kenneth R Silvay**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Accounting Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-905-20-23**

Amount of Each Receipt this Period

62.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Marcus D Skipwith**

Mailing Address 2 Chase Corporate Dr

City

Hoover

State

AL

Zip Code

35244-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30269-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Marcus D Skipwith**

Mailing Address 2 Chase Corporate Dr

City

Hoover

State

AL

Zip Code

35244-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30116-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

112.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jay Smith**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9157-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jay Smith**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Project Management Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9123-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. William J Smith**

Mailing Address 1601 Chestnut St  
 # 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFE INS. CO. OF NORTH AMERICA

Occupation

Business Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-6319-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 142 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. William J Smith

Mailing Address 1601 Chestnut St  
 # 2

City State Zip Code  
 Philadelphia PA 19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 LIFE INS. CO. OF NORTH AMERICA

Occupation  
 Business Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-6303-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Raymond Smithberger

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-9219-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Raymond Smithberger

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-9185-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Bill Sprague**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-19987-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Bill Sprague**

Mailing Address 1601 Chestnut St  
# 2

City Philadelphia State PA Zip Code 19192-0002

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

IT Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-19916-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **c. Craig J Steel**

Mailing Address 122 Demarest Ave

City Emerson State NJ Zip Code 07630-1747

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24485-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Craig J Steel**

Mailing Address 122 Demarest Ave

City State Zip Code  
Emerson NJ 07630-1747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-24382-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jennifer Stepp**

Mailing Address 4144 Central Ave

City State Zip Code  
Indianapolis IN 46205-2605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.40

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-3544-20-23**

Amount of Each Receipt this Period

15.38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jennifer Stepp**

Mailing Address 4144 Central Ave

City State Zip Code  
Indianapolis IN 46205-2605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Account Manager-National Accts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.40

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-3537-20-23**

Amount of Each Receipt this Period

36.98

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

102.36



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory J Sullivan**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-9755-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Gregory J Sullivan**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.30

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-9719-20-23**

Amount of Each Receipt this Period

26.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Shelly Swinford**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.36

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-3519-20-23**

Amount of Each Receipt this Period

22.07

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

75.93

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jan C Sykes**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna HEALTHCARE OF AZ, INC

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-7449-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jan C Sykes**

Mailing Address 25500 N Norterra Dr  
Bldg B

City State Zip Code  
Phoenix AZ 85085-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna HEALTHCARE OF AZ, INC

Occupation  
Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-7429-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amy J Szable**

Mailing Address 38901 Detroit Rd

City State Zip Code  
Avon OH 44011-2160

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
Business Comm Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-3368-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Amy J Szable**

Mailing Address 38901 Detroit Rd

City

Avon

State

OH

Zip Code

44011-2160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Business Comm Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-3361-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Neil B Tanner**

Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-16691-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Neil B Tanner**

Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-16629-20-23**

Amount of Each Receipt this Period

115.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nick C Taylor**

Mailing Address 1205 Brittany Ln

City State Zip Code  
 Upper Arlington OH 43220-4074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Pharmacy Senior Clinical Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-24497-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nick C Taylor**

Mailing Address 1205 Brittany Ln

City State Zip Code  
 Upper Arlington OH 43220-4074

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Pharmacy Senior Clinical Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-24394-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Terry W Terrill**

Mailing Address 530 Great Circle Rd

City State Zip Code  
 Nashville TN 37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29437-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER: PAGE 149 OF 173  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Terry W Terrill**

Mailing Address 530 Great Circle Rd

City

Nashville

State

TN

Zip Code

37228-1309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Human Resources Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-29291-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeffrey E Tindall**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-9929-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Jeffrey E Tindall**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Government Affairs Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-9893-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Rowena Track**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Digital Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-32500-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Rowena Track**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Digital Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-32324-20-23**

Amount of Each Receipt this Period

120.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Michael W Triplett**

Mailing Address 901 E Cary St

City State Zip Code  
 Richmond VA 23219-4063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Regional Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-629-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

365.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael W Triplett**

Mailing Address 901 E Cary St

City State Zip Code  
 Richmond VA 23219-4063

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Regional Segment Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-629-20-23**

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Charles Ugel**

Mailing Address 29185 Valley Oak PI

City State Zip Code  
 Santa Clarita CA 91390-4196

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2016

**Transaction ID : 20160502-3743-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Charles Ugel**

Mailing Address 29185 Valley Oak PI

City State Zip Code  
 Santa Clarita CA 91390-4196

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2016

**Transaction ID : 20160516-3735-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michelle Vancura**

Mailing Address 35507 N Via Tramonto

City State Zip Code  
 Phoenix AZ 85086-5516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23505-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Michelle Vancura**

Mailing Address 35507 N Via Tramonto

City State Zip Code  
 Phoenix AZ 85086-5516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Market Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-23406-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Alicia J Vaslow**

Mailing Address 818 Fairway Dr

City State Zip Code  
 Towson MD 21286-7803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Benefits Strategy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-29207-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 153 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Alicia J Vaslow**

Mailing Address 818 Fairway Dr

City State Zip Code  
Towson MD 21286-7803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Benefits Strategy Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-29063-20-23**

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Julie A Vayer**

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
Sunrise FL 33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna BEHAVIORAL HEALTH, INC.

Occupation

VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-7096-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Julie A Vayer**

Mailing Address 1571 Sawgrass Corporate Pkwy

City State Zip Code  
Sunrise FL 33323-2862

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna BEHAVIORAL HEALTH, INC.

Occupation

VP Total Health & Network Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-7076-20-23**

Amount of Each Receipt this Period

75.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

180.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 154 OF 173

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jennifer L Velasquez**

Mailing Address 11401 SW 40th St

City

Miami

State

FL

Zip Code

33165-3372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-30753-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jennifer L Velasquez**

Mailing Address 11401 SW 40th St

City

Miami

State

FL

Zip Code

33165-3372

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

App Development Sr Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-30599-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Martha I Vinas**

Mailing Address 2701 N Rocky Point Dr

City

Tampa

State

FL

Zip Code

33607-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-19584-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Cigna Corporation Political Action Committee

Full Name (Last, First, Middle Initial)

A. Martha I Vinas

Mailing Address 2701 N Rocky Point Dr

City State Zip Code  
 Tampa FL 33607-5917

FEC ID number of contributing federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-19513-20-23

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Philip J Wasden

Mailing Address 300 Big Bend Trl

City State Zip Code  
 Sugar Hill GA 30518-5691

FEC ID number of contributing federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF GA, INC.

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 05 / 2016

Transaction ID : 20160502-4569-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Philip J Wasden

Mailing Address 300 Big Bend Trl

City State Zip Code  
 Sugar Hill GA 30518-5691

FEC ID number of contributing federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF GA, INC.

Occupation

Senior Account Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 19 / 2016

Transaction ID : 20160516-4556-20-23

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Peter B Welch**

Mailing Address 1 Front St

City State Zip Code  
San Francisco CA 94111-5325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-6894-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Peter B Welch**

Mailing Address 1 Front St

City State Zip Code  
San Francisco CA 94111-5325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT GENERAL LIFE INSURANCE CO

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 19 / 2016

**Transaction ID : 20160516-6875-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. William M Welch**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

**Transaction ID : 20160502-20454-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 157 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William M Welch**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Assoc Chief Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-20380-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Peter L Westover**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Underwriting Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-23971-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Peter L Westover**Mailing Address 1601 Chestnut St  
# 2

City

Philadelphia

State

PA

Zip Code

19192-0002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Underwriting Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-23870-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jennifer L Wheatley**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-14969-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jennifer L Wheatley**

Mailing Address 8505 E Orchard Rd

City

Greenwood Village

State

CO

Zip Code

80111-5002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Senior Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-14915-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Reginald White**

Mailing Address 3500 Piedmont Rd NE

City

Atlanta

State

GA

Zip Code

30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-10203-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Reginald White**

Mailing Address 3500 Piedmont Rd NE

City State Zip Code  
 Atlanta GA 30305-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-10167-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. Diane M Wilkosz**

Mailing Address 2701 N Rocky Point Dr

City State Zip Code  
 Tampa FL 33607-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-1740-20-23**

Amount of Each Receipt this Period

74.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. Diane M Wilkosz**

Mailing Address 2701 N Rocky Point Dr

City State Zip Code  
 Tampa FL 33607-5917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CIGNA HEALTHCARE OF FL, INC

Occupation

Provider Contracting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-1739-20-23**

Amount of Each Receipt this Period

74.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

198.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 160 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jenny R Wilson**

Mailing Address 401 Chestnut St

City

Chattanooga

State

TN

Zip Code

37402-4924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-3206-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jenny R Wilson**

Mailing Address 401 Chestnut St

City

Chattanooga

State

TN

Zip Code

37402-4924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Underwriting Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-3199-20-23**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Daniel Wiss**

Mailing Address 231 S Bemiston Ave

City

Clayton

State

MO

Zip Code

63105-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-8224-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

140.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Daniel Wiss**

Mailing Address 231 S Bemiston Ave

City

Clayton

State

MO

Zip Code

63105-1914

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-8201-20-23**

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bradley A Wolfram**

Mailing Address 11200 Lakeline Blvd  
Ste 100

City

Austin

State

TX

Zip Code

78717-0083

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-31425-20-23**

Amount of Each Receipt this Period

86.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bradley A Wolfram**

Mailing Address 11200 Lakeline Blvd  
Ste 100

City

Austin

State

TX

Zip Code

78717-0083

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Operations Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-31266-20-23**

Amount of Each Receipt this Period

86.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

212.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 162 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John M Wray**

Mailing Address 140 E 45th St

City

New York

State

NY

Zip Code

10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-21172-20-23**

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John M Wray**

Mailing Address 140 E 45th St

City

New York

State

NY

Zip Code

10017-3144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Network Delivery Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2016

**Transaction ID : 20160516-21092-20-23**

Amount of Each Receipt this Period

175.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Bu Yang**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CT GENERAL LIFE INSURANCE CO

Occupation

IT Senior Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2016

**Transaction ID : 20160502-6853-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

405.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bu Yang**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 CT GENERAL LIFE INSURANCE CO

Occupation  
 IT Senior Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-6835-20-23**

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. John Yardley**

Mailing Address 9 Griffin Rd N

City State Zip Code  
 Windsor CT 06095-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Cigna Corp.

Occupation  
 Technical Support Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-19812-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. John Yardley**

Mailing Address 9 Griffin Rd N

City State Zip Code  
 Windsor CT 06095-1512

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation  
 Technical Support Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-19741-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 173

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeffrey Young**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Informatics/Analytics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-277-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Jeffrey Young**

Mailing Address 900 Cottage Grove Rd

City State Zip Code  
 Bloomfield CT 06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 CT GENERAL LIFE INSURANCE CO Informatics/Analytics Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-277-20-23**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. David G Zach**

Mailing Address 9 Heritage Ln

City State Zip Code  
 Phoenixville PA 19460-4607

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
 Cigna Corp. Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-23034-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David G Zach**

Mailing Address 9 Heritage Ln

City

Phoenixville

State

PA

Zip Code

19460-4607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

Sales Director-Sales Mgt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-22942-20-23**

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. George Zaruba**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

05 / 05 / 2016

**Transaction ID : 20160502-21636-20-23**

Amount of Each Receipt this Period

154.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. George Zaruba**

Mailing Address 900 Cottage Grove Rd

City

Bloomfield

State

CT

Zip Code

06002-2920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cigna Corp.

Occupation

VP Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1540.00

Date of Receipt

05 / 19 / 2016

**Transaction ID : 20160516-21556-20-23**

Amount of Each Receipt this Period

154.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

408.00

32002.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 166 OF 173

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Blumenthal for Connecticut**Mailing Address 777 Summer Street Ste 103  
C/O Cacace Tusch & Santagata

City Stamford State CT Zip Code 06901

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**Richard Blumenthal**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 87FDE1CAC3649161CAB**

Amount of Each Disbursement this Period

1000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DCCC**Mailing Address 430 South Capitol Street, SE  
2nd Floor

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement  
2016 Contribution

011

Category/  
Type

Candidate Name

**DCCC**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : D482424BDB89A640C6E**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Larson for Congress**

Mailing Address PO Box 261172

City Hartford State CT Zip Code 06126-1172

Purpose of Disbursement  
2016 General

011

Category/  
Type

Candidate Name

**John Barry Larson**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : E897C2849CD91C73663**

Amount of Each Disbursement this Period

1500.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Montana Democratic Party**

Mailing Address PO Box 802

City Helena	State MT	Zip Code 59624
----------------	-------------	-------------------

Purpose of Disbursement  
2016 Contribution

Candidate Name

**Montana Democratic Party**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : D0B08CBA68A12FFAC95**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Walberg for Congress**

Mailing Address PO Box 1362

City Jackson	State MI	Zip Code 49204-1362
-----------------	-------------	------------------------

Purpose of Disbursement  
2016 Primary

Candidate Name

**Timothy L. Walberg**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 82D4E77D39025998425**

Amount of Each Disbursement this Period

1000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00
---------

13500.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 173

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bethel for Georgia Senate**

Mailing Address 1701 Briarcliff Circle

City	State	Zip Code
Dalton	GA	30720

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 49AA152B5EC2802EE14**

Amount of Each Disbursement this Period

1000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Howard Maxwell**

Mailing Address 716 Graham Road

City	State	Zip Code
Dallas	GA	30132

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 8FCE4226B3C7BF2A587**

Amount of Each Disbursement this Period

750.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee to Elect Jeff Mullis**

Mailing Address 212 English Avenue

City	State	Zip Code
Chickamauga	GA	30707

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : F7E6503456C385E97E5**

Amount of Each Disbursement this Period

1000.00
---------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2750.00
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

# Cigna Corporation Political Action Committee

### A. Cowsert For Senate

Mailing Address PO Box 7627

City	State	Zip Code
Athens	GA	30603

Purpose of Disbursement	Nonfederal Contribution
<p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p>	<p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p>

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 389060BCDA6B292402C

Amount of Each Disbursement this Period

1000.00

 Memo Item

Full Name (Last, First, Middle Initial)

## B. Friends of Andy Sanborn

Mailing Address 71 Eagle Dr

City	State	Zip Code
Bedford	NH	03110

Purpose of Disbursement	Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : B20C0C95FB2D77F5157

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Friends of Bert Reeves

Mailing Address 890 Crossfire Ridge - Unit 1211

City	State	Zip Code
Marietta	GA	30064

Purpose of Disbursement	Nonfederal Contribution
<p>1. <i>Statewide</i></p> <p>2. <i>Local</i></p>	<p>1. <i>Statewide</i></p> <p>2. <i>Local</i></p>

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : 59AB242AE6FA17CF0A2

Amount of Each Disbursement this Period

500.00

 Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Jon Burns**

Mailing Address PO Box 1000

City Springfield	State GA	Zip Code 31329
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Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 456A5AA962C1BB22F14**

Amount of Each Disbursement this Period

1000.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Josh Stein for Attorney General**

Mailing Address PO Box 10382

City Raleigh	State NC	Zip Code 27605
-----------------	-------------	-------------------

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : DD6D4386E50922B40B8**

Amount of Each Disbursement this Period

2500.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael A. Cheokas Campaign Committee**

Mailing Address PO Box 824

City Americus	State GA	Zip Code 31709
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Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 2ED31C870166B4FD870**

Amount of Each Disbursement this Period

500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ralston for Representative Committee**

Mailing Address PO Box 1196

City	State	Zip Code
Blue Ridge	GA	30513

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 200CE83AD04E0CD87E7**

Amount of Each Disbursement this Period

1500.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Senate Republican Majority PAC**Mailing Address 373 South Willow St.  
C/O Liberty Strategies and Develop

City	State	Zip Code
Manchester	NH	03103

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 02C8804F9455982A778**

Amount of Each Disbursement this Period

500.00
--------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Senator Nicole Poolman for Lt. Governor**

Mailing Address 6517 Misty Waters Dr

City	State	Zip Code
Bismarck	ND	58503

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 15BAD2EB3F9AC48F955**

Amount of Each Disbursement this Period

2500.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Sharon Cooper for State House**

Mailing Address 2700 Cumberland Parkway, Suite 104

City	State	Zip Code
Atlanta	GA	30339

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : C3B5AC33616DBF3E86F**

Amount of Each Disbursement this Period

750.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Stenehjem for Governor**

Mailing Address PO Box 1532

City	State	Zip Code
Bismarck	ND	58502

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 1B65878511BA839F76B**

Amount of Each Disbursement this Period

5000.00
---------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. The Committee to Elect Terry England**

Mailing Address 1060 Old Hog Mountain Road

City	State	Zip Code
Auburn	GA	30011

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : E2C711BE5289E7F1306**

Amount of Each Disbursement this Period

750.00
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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Cigna Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. The Goodwin Committee**

Mailing Address PO Box 27841

City  
RaleighState  
NCZip Code  
27611-7841Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		11		2016

**Transaction ID : 4B8E7C6107B98AF3092**

Amount of Each Disbursement this Period

2500.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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22250.00
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